



## TRANSMITTAL FORM

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		<b>Application Number</b> 10/098,623 <b>Filing Date</b> March 18, 2002 <b>First Named Inventor</b> Shigeki Yoshida <b>Group Art Unit</b> 2872 <b>Examiner Name</b> Mark A. Robinson  <b>Total Number of Pages in This Submission</b> _____ <b>Attorney Docket Number</b> 740165-327
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### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input checked="" type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Submission of Replacement Sheet – Figs. 2 and 3  <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD; Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

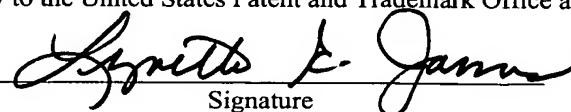
<b>Firm or Individual name</b>	Thomas W. Cole Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W. Suite 900 Washington, D.C. 20004-2128
<b>Signature</b>	
<b>Date:</b> December 4, 2003	<span style="float: right; text-align: right;">RECEIVED DEC 10 2003 TECHNOLOGY CENTER 2800</span>

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



re Patent Application of: )  
 Shigeki Yoshida ) Group Art Unit: 2872  
 Serial No. 10/098,623 ) Confirmation No.: 3692  
 Filed: March 18, 2002 ) Examiner: Mark A. Robinson  
 For: MIRROR DEVICE FOR VEHICLE )  
 )  
 )  
 )

**SUBMISSION OF REPLACEMENT SHEET OF FORMAL DRAWINGS IN  
RESPONSE TO THE OFFICE ACTION**

Commissioner for Patents  
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Sir:

In response to the Office Action dated September 4, 2003, submitted herewith are two (2) replacement sheets of drawings consisting of Figs. 2 and 3 for filing in the above-identified application.

Respectfully submitted,

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